

STAGES OF CHANGE (DIETARY FAT)

1. Do you consistently avoid eating high fat foods?

- NO, and I do NOT intend to in the next 6 months.
- NO, but I intend to in the next 6 months.
- NO, but I intend to in the next 30 days.
- YES, and I have been, but for LESS than 6 months.
- YES, and I have been for MORE than 6 months.

Please answer "Yes" or "No" to each of the following:

- | | No | Yes |
|---|-----------------------|-----------------------|
| 1. Do you ALMOST ALWAYS take the skin off your chicken? (If you do not eat chicken, but you do eat red meat, please choose "No". If you do not eat chicken or red meat, please choose "Yes".) | <input type="radio"/> | <input type="radio"/> |
| 2. Do you OFTEN eat reduced fat or low-fat cheese? (If you rarely eat cheese, please choose "Yes".) | <input type="radio"/> | <input type="radio"/> |
| 3. Do you OFTEN use light, fat free, or no salad dressing? (If you do not eat salads, please choose "No".) | <input type="radio"/> | <input type="radio"/> |
| 4. Do you SOMETIMES eat fruit and vegetables as snacks? (If you do not eat high-fat snacks like chips, pastry, or donuts, please choose "Yes".) | <input type="radio"/> | <input type="radio"/> |
| 5. Do you OFTEN eat bread, rolls, or muffins without butter or margarine? | <input type="radio"/> | <input type="radio"/> |

6. Do you intend to change what you are eating so you can answer all five of the previous questions YES?

- NO, and I do NOT intend to in the NEXT 6 MONTHS.
- YES, and I intend to in the NEXT 6 MONTHS.
- YES, and I intend to in the NEXT 30 DAYS.
- I answered "Yes" to all five of the previous questions.